

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

RECEIVED  
EMAIL  
SEP - 4 2008

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Buller for Board

IMPORTANT: Indicate by # type of committee you are reporting for: 7

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party (if applicable)

Tyler Buller

Office Sought

District (if Senate or House)

Johnston Community School District School Board

FORM

**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_  
Logged In \_\_\_\_\_  
Scanned \_\_\_\_\_  
Computer \_\_\_\_\_  
Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

**Tyler Buller**

**515-975-0191**

**Sept. 4, 2008**

**SIGNATURE OF PERSON FILING REPORT**

**TELEPHONE**

**DATE SIGNED**

I AM FILING A Sept. 4, 2008

(report date)

REPORT FOR (1) ELECTION/(2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

Sept. 9, 2008

County & Local Committees, enter County in  
which Election is held  
Polk

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

2,268.00

Schedule F: Loans Received total (Attach Schedule F)

300.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL**.....\$ 2,568.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

2,165.68

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 402.32

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

80.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

300.00

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Buller for Board

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
07/21/08	ID# CK#	Chris Sonner 7041 Sharon Place Urbandale, IA 50322		\$50	<input type="checkbox"/>
07/23/08	ID# CK#	Russ Underwood 8111 Wellington Blvd Johnston, IA 50131		\$200	<input type="checkbox"/>
07/23/08	ID# CK#	Steve Goers 8701 Stonepointe Ln Johnston, IA 50131		\$125	<input type="checkbox"/>
07/24/08	ID# CK#	Thomas F. Jones 8127 Hardwicke Drive Johnston, IA 50131		\$75	<input type="checkbox"/>
07/24/08	ID# CK#	Jana Dewhurst 9533 Woodland Drive Johnston, IA 50131		\$25	<input type="checkbox"/>
07/24/08	ID# CK#	Vickey Feaster 9433 Enfield Drive Johnston, IA 50131		\$50	<input type="checkbox"/>
07/26/08	ID# CK#	Wendy Haight 8500 Newbury Court Johnston, IA 50131		\$100	<input type="checkbox"/>
07/26/08	ID# CK#	Paul Nagel 6006 Blackstone Johnston, IA 50131		\$25	<input type="checkbox"/>
07/26/08	ID# CK#	Ann Carlson 5838 Crabapple Lane Johnston, IA 50131		\$50	<input type="checkbox"/>
07/26/08	ID# CK#	Lisa L. Selover 8220 Northview Drive	aunt	\$25	<input type="checkbox"/>
SUB-TOTAL				\$ 725	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 4  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Buller for Board

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
07/30/08	ID# CK#	Helen Cropp 9844 Brookview Drive Urbandale, IA 50322		\$25	<input type="checkbox"/>
07/30/08	ID# CK#	Eileen Robb 9844 Brookview Drive Urbandale, IA 50322		\$50	<input type="checkbox"/>
07/30/08	ID# CK#	Tim Blutt 5115 Twana Drive Des Moines, IA 50131		\$25	<input type="checkbox"/>
07/31/08	ID# CK#	Jill Morrill 7717 Goodman Drive Urbandale, IA 50322		\$25	<input type="checkbox"/>
07/31/08	ID# CK#	Don Miller PO Box 647 Johnston, IA 50131		\$50	<input type="checkbox"/>
07/31/08	ID# CK#	Sheri Thompson 6418 Sutton Drive Urbandale, IA 50322		\$25	<input type="checkbox"/>
08/01/08	ID# CK#	Kim Buller 7804 Goodman Circle Urbandale, IA 50322	parent	\$300	<input type="checkbox"/>
08/02/08	ID# CK#	Maureen Shannon 4811 77th Street Urbandale, IA 50322		\$25	<input type="checkbox"/>
08/02/08	ID# CK#	Karen Walker 26011 105th Street Spirit Lake, IA 51360	grandparent	\$25	<input type="checkbox"/>
08/04/08	ID# CK#	Ann Koopal 7812 Goodman Circle Urbandale, IA 50322		\$25	<input type="checkbox"/>
SUB-TOTAL				\$ 575	
TOTAL (if last page of this schedule)				\$	

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Page 2 of 4  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Buller for Board

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08/05/08	ID# CK#	Shelley Dreibelbeis 8121 Heatherbow Johnston, IA 50131		\$25	<input type="checkbox"/>
08/05/08	ID# CK#	Lori Rottenberg 9050 NW 62nd Ave Johnston, IA 50131		\$50	<input type="checkbox"/>
08/06/08	ID# CK#	Peter Coaldrake 6413 Harbor Oaks Drive Johnston, IA 50131		\$100	<input type="checkbox"/>
08/07/08	ID# CK#	Paul Grodt 8110 Goodman Drive Johnston, IA 50131		\$25	<input type="checkbox"/>
08/07/08	ID# CK#	Sarah Brown-Wessling 2801 SW Homestead Cir Ankeny, IA 50023		\$25	<input type="checkbox"/>
08/09/08	ID# CK#	Brian Laurenzo 5508 Garrison Ct Johnston, IA 50131		\$25	<input type="checkbox"/>
08/10/08	ID# CK#	Jodi Christensen 7508 Hickory Lane Urbandale, IA 50322		\$25	<input type="checkbox"/>
08/13/08	ID# CK#	John Haas 7801 Goodman Circle Urbandale, IA 50322		\$40	<input type="checkbox"/>
08/13/08	ID# CK#	Tracy Rood 6010 Weybridge Johnston, IA 50131		\$25	<input type="checkbox"/>
08/15/08	ID# CK#	Cheryl Garland 8110 Heather Bow Johnston, IA 50131		\$25	<input type="checkbox"/>
SUB-TOTAL				\$ 365	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Buller for Board

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
08/15/08	ID# CK#	Jane Andrew 3300 Southern Woods Des Moines, IA 50321	aunt	\$75	<input type="checkbox"/>
08/16/08	ID# CK#	Doyle Sanders 5325 NW 90th Court Johnston, IA 50131		\$100	<input type="checkbox"/>
08/18/08	ID# CK#	Dae Underwood 8111 Wellington Johnston, IA 50131		\$200	<input type="checkbox"/>
08/22/08	ID# CK#	Roger Brown 4524 49th Street Des Moines, IA 50310		\$50	<input type="checkbox"/>
08/23/08	ID# CK#	Pat Schroeder 8219 N Winwood Drive Johnston, IA 50131		\$25	<input type="checkbox"/>
08/23/08	ID# CK#	Colleen Meyer 7805 Goodman Cir Urbandale, IA 50322		\$35	<input type="checkbox"/>
08/29/08	ID# CK#	Linda Kading 5866 Crabapple Lane Johnston, IA 50131		\$25	<input type="checkbox"/>
08/30/08	ID# CK#	Kim Fenimore 4816 Palm Des Moines, IA 50310		\$25	<input type="checkbox"/>
	ID# CK#	UNITEMIZED CONTRIBUTIONS		\$68	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 603	
TOTAL (if last page of this schedule)				\$ 2268	

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Buller for Board

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
07/17/08	ID# CK#debit	Bank of America 8525 Meredith Drive Urbandale, IA 50322	Check printing	\$ 29.00
07/18/08	ID# CK#debit	Office Depot 4347 Merle Hay Road Des Moines, IA 50310	Pens	\$6.97
07/18/08	ID# CK# debit	HyVee 8601 Douglas Ave Urbandale, IA 50322	Stamps	\$105.00
07/24/08	ID# CK# 1092	Carter Printing 1739 East Grand Ave Des Moines, IA 50316	Letterhead, envelope printing	\$116.60
07/29/08	ID# CK# 1002	Tyler Buller 7804 Goodman Circle Urbandale, IA 50322	reimbursement for purchase of list from Sec. of State	\$10.00
07/29/08	ID# CK# 1003	Tyler Buller 7804 Goodman Circle Urbandale, IA 50322	reimbursement for Polk County Recorder name reg.	\$7.00
08/02/08	ID# CK#debit	Office Depot 4347 Merle Hay Road Des Moines, IA 50310	Thank you cards, paper	\$38.10
08/02/08	ID# CK# debit	HyVee 8601 Douglas Ave Urbandale, IA 50322	Stamps	\$10.50
SUB-TOTAL				\$ 323.17
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE B</b> (Rev. 07/03)	<b>MONETARY EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Buller for Board

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/05/08	ID# CK# debit	Office Depot 4347 Merle Hay Des Moines, IA 50310	Clipboards	\$ 2.96
08/05/08	ID# CK# 1031	GMW Homeowners' Association 4949 Westown Pkwy West Des Moines, IA 50310	Gazebo rental	\$20
08/07/08	ID# CK# 1033	Carter Printing 1739 East Grand Ave Des Moines, IA 50316	Postcard printing	\$68.90
08/12/08	ID# CK# debit	Office Depot 4347 Merle Hay Road Des Moines, IA 50310	Nametags, pens	\$6.34
08/16/08	ID# CK# debit	Office Depot 4347 Merle Hay Road Des Moines, IA 50310	Business card printing	\$16.17
08/17/08	ID# CK# debit	Office Depot 4347 Merle Hay Road Des Moines, IA 50310	Mailing labels	\$24.37
08/18/08	ID# CK# 1035	Eric Dreibelbeis 8121 Heather Bow Johnston, IA 50131	Reimbursement for ice cream social expenses (ice cream, plates, spoons)	\$29.43
08/19/08	ID# CK# 1061	Kness Signs 8100 86th Street, STE A Urbandale, IA 50322	Yard signs	\$505.42
SUB-TOTAL				\$ 673.59
TOTAL (if last page of this schedule)				\$

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES:** NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Buller for Board

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/20/08	ID# CK# debit	Office Depot 4347 Merle Hay Road Des Moines, IA 50310	Paper for fliers	\$ 13.77
08/23/08	ID# CK# debit	Office Depot 4347 Merle Hay Road Des Moines, IA 50310	Stamps, envelopes, business card printing	\$53.99
08/29/08	ID# CK# debit	United States Post Office 5874 Merle Hay Road Johnston, IA 50310	Stamps	\$432.00
08/29/08	ID# CK# debit	Office Max 2900 University Ave West Des Moines, IA 50266	Labels	\$17.46
08/29/08	ID# CK# debit	Bank of America 8525 Meredith Drive Urbandale, IA 50322	Maintenance fee	\$11.00
08/30/08	ID# CK# debit	Office Max 2900 University Ave West Des Moines, IA 50266	Labels	\$5.82
08/30/08	ID# CK# 1062	Carter Printing 1739 East Grand Ave Des Moines, IA 50316	Postcard printing	\$408.10
08/30/08	ID# CK# 1064	Bull's Eye News PO Box 392 Polk City, IA 50226	Advertising purchase	\$160.00
SUB-TOTAL				\$ 1102.14
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)



FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES:** NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Buller for Board

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/30/08	ID# CK# 1063	Carter Printing 1739 East Grand Ave Des Moines, IA 50316	Postcard printing	\$ 66.78
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 66.78
TOTAL (if last page of this schedule)				\$ 2165.68

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Buller for Board

Reset Form

SCHEDULE

**E**

(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS

☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
08/14/08	John Buller 7804 Goodman Circle Urbandale, IA 50322	parent	Banner	\$ 80.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 80.00	
TOTAL (if last page of this schedule)				\$ 80.00	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

**RESET**

SCHEDULE

**F**

(Rev. 02/08)

**LOANS  
RECEIVED  
& REPAYED**☐ **CHECK THIS BOX IF  
AMENDING FORM****COMMITTEE NAME**(Must be same as on Statement of Organization)

Buller for Board

**NOTE:** This schedule reports money loaned to the committee which is deposited in the committee account.**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$** 0.00**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
07/09/08	Tyler Buller 7804 Goodman Circle Urbandale, IA 50322	self	\$ 100.00
07/19/08	Tyler Buller 7804 Goodman Circle Urbandale, IA 50322	self	\$200.00

**TOTAL (PART I)** \$ 300.00**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

**TOTAL CASH REPAYMENTS (PART II)** \$ 0.00From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.00**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ 300.00

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.